

P E N I S T O N E

R U R A L      D I S T R I C T      C O U N C I L

A N N U A L      R E P O R T

O F    T H E

M E D I C A L    O F F I C E R    O F    H E A L T H

F O R    T H E    Y E A R

1   9   7   2







PENISTONE RURAL DISTRICT COUNCIL.

PUBLIC HEALTH COMMITTEE, 1972.

Councillor F.B. Lamb (Chairman of the Council).

Councillor F. Illingsworth (Chairman of Public Health Committee).

Councillor G.E. Mann

Councillor L. Beever, J.P. (Vice-Chairman of the Council)

Councillor W.G.A. Carrington

Councillor W. Carter

Councillor H.B. Garfield.

Councillor V. Hough

Councillor E. Hoyland

Councillor Mrs. K.F. Jackson

Councillor W. Kent

Councillor J.A. Moxon

Councillor D.W. Myers

Councillor W.E. Spencer

Councillor Mrs. M.E. Thawley

Councillor J. Wade

Councillor J.P. Warburton (Vice-Chairman of Public Health Committee).

STAFF OF THE HEALTH DEPARTMENT.

Medical Officer of Health:

F.C. Armstrong, M.B., Ch.B., D.P.H.(St. Andrews)

Chief Public Health Inspector and Surveyor:

L.J. Pearson, M.R.S.H., M.A.P.H.I.

Assistant Public Health Inspector:

A. Morton, M.A.P.H.I., M.R.S.H.

OFFICIAL ADDRESS OF MEDICAL OFFICER OF HEALTH

Divisional Health Office,  
Mortomley Hall,  
High Green,  
Sheffield, S30 4HR.

Tel.No. High Green 292.



ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH  
FOR THE YEAR 1972.

Ladies & Gentlemen:

I have the honour to submit my Annual Report for the year ended 31st December, 1972.

Of necessity the report is much briefer than in past years, although all the essential facts and figures are still included. The reason for the brevity is, of course, the vast amount of additional work, especially clerical, which has arisen because of re-organisation in Local Government and in the Health Service. Apart from the additional work-load, all levels of staff have felt uneasy and restless over such major changes.

It is early days to predict the final results of Health Service re-organisation; nevertheless, the principles of unification of the three arms of administration should make for more efficient planning of the way the services should develop. Some care is needed to see that the help and advice which local authorities need continues to be readily available. So far, the preparations to provide this seem satisfactory to me. No doubt some adjustments and alterations will be needed according to the dictates of experience. In summation, I do not feel pessimistic at all over these changes.

The statistics relating to the district are not significantly different to previous years or to national figures, and, therefore, illustrate a continuing satisfactory service to the public. It is relevant, at this time, to point out that this is not just the Public Health Service in isolation. Almost all the measures we undertake depend on concerted approaches by the general practitioners, hospital services and ourselves, underlining again the logic in unification of the three branches.

In closing this introduction, I would like to thank past and present Councillors for their help and encouragement through the years. I have always found our association a friendly one, for which I am grateful. I hope and expect to meet again those who are continuing in public service in the new Authorities, so that not all the old ties will be broken.

My thanks also to all the Officers of the Council for their advice and help.

Last, but not by any means least, my thanks to my own staff - especially for their efforts over the last, very trying, eighteen months.

I am,

Yours faithfully,

F. C. ARMSTRONG.

Medical Officer of Health.







## DISTRICT STATISTICS IN BRIEF

1972.

The Penistone Rural District Council covers an area of 29,002 acres. The district is divided into 10 parishes. The approximate acreage and the number of houses in each parish is as follows:-

<u>PARISH</u>	<u>ACREAGE.</u>	<u>NUMBER OF HOUSES</u>
Cawthorne	3,709	483
Dunford	8,953	280
Gunthwaite & Ingbirchworth	2,057	122
High Hoyland	851	55
Hunshelf	1,816	96
Langsett	4,914	82
Oxspring	1,201	297
Silkstone	1,559	700
Stainborough	1,720	167
Thurgoland	2,222	596
	<u>29,002</u>	<u>2,878</u>

The Rateable Value of the district is £333,512, while the Product of a Penny Rate is estimated to be £3,277.00 as at 1st April, 1972.

## VITAL STATISTICS.

### POPULATION

The Registrar-General has given his estimation of the population at the mid-year as 7,530. This is 90 more than the figure for the previous year.

### BIRTHS.

There were 103 live births attributed to the district during 1972; of these 49 were males and 54 females. There were 6 illegitimate births (3 male, 3 female).

### STILL-BIRTHS

During the year there was one still-birth.

### DEATHS

75 deaths were attributed to the district, a decrease of 3 when compared with the figure for 1971. Set out below are tables of Live Birth Rates, Still-birth Rates and Crude Death Rates, with those rates for other parts of the country.

RATES PER 1,000 TOTAL POPULATION

<u>YEAR</u>	<u>ENGLAND AND WALES</u>	<u>WEST RIDING ADMINISTRATIVE COUNTY</u>	<u>PENISTONE R.D. Crude Rate.</u>	<u>Corrected Rate.</u>
<u>LIVE BIRTHS.</u> (Rates per 1,000 of the population)				
1972	14.8	15.4	13.7	13.0
1971	16.0	17.0	14.2	13.7
1970	16.0	17.3	15.5	14.9
1969	16.3	16.9	13.7	13.2
1968	16.9	17.6	13.4	12.8

<u>DEATHS (Crude Death Rate)</u>				
1972	12.1	12.1	10.0	11.4
1971	11.6	11.4	10.5	11.8
1970	11.7	11.7	9.6	10.9
1969	11.9	11.6	11.5	13.3
1968	11.9	11.6	12.3	14.3

<u>STILL-BIRTHS</u> (Rates per 1,000 Live and Still-births)				
1972	12.0	12.2	9.6	
1971	12.5	12.3	00.0	
1970	13.0	13.6	8.4	
1969	13.2	13.5	9.6	
1968	14.3	14.3	10.0	

PRINCIPAL CAUSES OF DEATH

	<u>Male</u>	<u>Female</u>	<u>Total</u>
<u>MEASLES</u>	-	1	1
<u>MALIGNANT NEOPLASM</u>			
Oesophagus	-	1	1
Prostate	1	-	1
Stomach	1	-	1
Lung and Bronchus	1	1	2
Breast	-	1	1
Intestine	1	1	2
Other sites, including Leukaemia	1	-	1
Other Malignant Neoplasms	3	1	4
Benign and Unspecified Neoplasms	1	-	1
<u>DIABETES</u>	1	-	1
<u>CIRCULATORY SYSTEM</u>			
Cerebro-vascular Disease	8	3	11
Hypertensive Disease	1	2	3
Ischaemic Heart Disease	9	11	20
Chronic Rheumatic Heart Disease	-	-	-
Other Heart Disease	3	2	5
Other Circulatory Disease	4	4	8
<u>RESPIRATORY SYSTEM</u>			
Influenze	-	-	-
Bronchitis and Emphysema	3	1	4
Pneumonia	2	-	2
Tuberculosis of Respiratory System	-	-	-
Other Diseases of Respiratory System	1	-	1
<u>INTESTINAL OBSTRUCTION AND HERNIA</u>	1	-	1

PRINCIPAL CAUSES OF DEATH (Contd.)

	<u>Male</u>	<u>Female</u>	<u>Total</u>
<u>GENITO-URINARY SYSTEM</u>			
Hyperplasia of Prostate	-	-	-
Other Diseases of Genito-Urinary System	-	1	1
<u>OTHER ENDOCRINE DISEASES, etc.</u>	-	-	-
<u>DIGESTIVE SYSTEM</u>			
Peptic Ulcer	-	-	-
<u>BONES AND MUSCULAR SYSTEM</u>			
Diseases of Musculo-skeletal system	-	-	-
<u>ANAEMIAS</u>	-	-	-
<u>CONGENITAL ANOMALIES</u>	1	-	1
<u>ACCIDENTS AND VIOLENCE</u>			
Motor-vehicle accidents	-	1	1
All other accidents	-	-	-
All other external causes	-	-	-
Suicide and self inflicted Injuries	-	1	1
	<u>43</u>	<u>32</u>	<u>75</u>

AGE DISTRIBUTION OF DEATHS

	<u>1968</u>	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972</u>
Under 1 year	-	1	2	-	2
1 to 2 years	-	1	1	-	-
2 to 5 years	-	2	-	-	-
5 to 15 years	1	-	-	2	1
15 to 25 years	-	-	-	1	1
25 to 45 years	3	2	1	-	1
45 to 65 years	24	21	18	18	16
65 years and over	63	59	51	57	54
	<u>91</u>	<u>86</u>	<u>73</u>	<u>78</u>	<u>75</u>

DEATHS UNDER ONE YEAR

Rate per 1,000 Live Births

<u>YEAR</u>	<u>ENGLAND AND WALES</u>	<u>WEST RIDING ADMINISTRATIVE COUNTY</u>	<u>PENISTONE R.D.</u>
1972	17.2	17.6	19.4
1971	17.5	18.4	00.0
1970	18.2	19.8	16.9
1969	18.1	18.9	9.7
1968	18.3	18.5	00.0

1972 INFANT DEATHS.

<u>Cause of Death.</u>	<u>Under 1 week</u>	<u>1 - 2 weeks</u>	<u>2 - 3 weeks</u>	<u>3 - 4 weeks</u>	<u>Total under 4 weeks</u>	<u>1 - 3 months</u>	<u>3 - 6 months</u>	<u>6 - 9 months</u>	<u>9 -12 months</u>	<u>Total under 1 year</u>
Cerebral Haemorrhage	1	-	-	-	1	-	-	-	-	1
Broncho Pneumonia	-	-	-	-	-	-	1	-	-	1
Totals:	1	-	-	-	1	-	1	-	-	2



## MATERNAL MORTALITY.

There were no maternal deaths during 1972.

## INQUESTS

The number of inquests held during 1972 was 2. In 14 cases the causes of death was certified after Post-mortem Examination without inquest.

## NATIONAL HEALTH SERVICE ACTS, 1946/57

### VITAL STATISTICS

#### Mothers and Infants

#### Live Births

Number	106.
Rate per 1,000 population	14.2

Illegitimate Live Births (per cent of total live births)	1.8
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#### Still-births

Number	-
Rate per 1,000 total live and still-births	-

Total Live and Still-births	106
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Infant Deaths (deaths under one year)	-
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#### Infant Mortality Rates

Total infant deaths per 1,000 total live births	-
Legitimate infant deaths per 1,000 legitimate live births	-
Illegitimate infant deaths per 1,000 illegitimate live births	-

Neo-natal Mortality Rate (deaths under four weeks per 1,000 total live births)	-
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Early Neo-natal Mortality Rate (deaths under one week per 1,000 total live births)	-
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Perinatal Mortality Rate (still-births and deaths under one week combined per 1,000 total live and still-births)	-
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#### Maternal Mortality (including abortion)

Number of deaths	-
Rate per 1,000 total live and still-births	-

## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

### Infectious Diseases other than Tuberculosis

During the year 31 cases of Infectious Disease were notified. The following tables are self-explanatory.

<u>DISEASE</u>	<u>1968</u>	<u>1969</u>	<u>1970</u>	<u>1971</u>	<u>1972.</u>
Scarlet Fever	-	4	2	1	2
Diphtheria	-	-	-	-	-
Measles	85	3	41	9	27
Whooping Cough	1	-	-	3	-
Acute Anterior Poliomyelitis	-	-	-	-	-
Erysipelas	-	-	-	-	-
Dysentery	-	-	-	-	1
Food Poisoning	-	-	-	-	-
Malaria	-	-	-	-	-
Acute Meningitis	1	1	1	-	-
Meningococcal Infection	-	-	-	-	-
Acute Encephalitis (Infective)	-	1	-	-	-
Infective Jaundice	-	3	1	-	1
	87	12	45	13	31

ATTACK RATE OF COMMONER INFECTIOUS DISEASES

<u>DISEASE</u>	<u>ENGLAND AND WALES</u>	<u>WEST RIDING ADMINISTRATIVE COUNTY</u>	<u>PENISTONE R.D.</u>
Scarlet Fever	0.23	0.38	0.26
Diphtheria	0.00	0.00	0.00
Measles	2.97	6.14	3.58
Whooping Cough	0.04	0.03	0.00
Acute Poliomyelitis (Paralytic)	0.00	0.00	0.00
(Non-Paralytic)	0.00	0.00	0.00
Dysentery	0.18	0.07	0.13
Typhoid Fever	0.00	0.00	0.00
Paratyphoid Fever	0.00	0.00	0.00

<u>DISEASE</u>	AGE GROUP		0 - 1 year	1 - 2 years	2 - 3 years	3 - 4 years	4 - 5 years	5 - 10 years	10 - 15 years	15 - 25 years	25 - 35 years	35 - 45 years	45 - 65 years	65 years and over	Age unknown
Scarlet Fever			-	1	-	-	-	1	-	-	-	-	-	-	2
Measles			-	-	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough			-	-	-	-	-	-	-	-	-	-	-	-	-
Infective Jaundice			-	-	-	-	-	-	-	-	-	-	-	1	1
Dysentery			-	-	-	-	1	-	-	-	-	-	-	-	1
Acute Encephalitis (Infective)			-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Meningitis			-	-	-	-	-	-	-	-	-	-	-	-	-
Food Poisoning			-	-	-	-	-	-	-	-	-	-	-	-	-
TOTALS:			-	3	1	5	3	15	2	-	-	-	-	1	31



DIPHTHERIA

The figures shown below illustrate an immunisation rate of approximately 90%. Before adopting the computer system of recording, the rate was approximately 70%. This increase applies also to Whooping Cough and Tetanus immunisation.

Primary Immunisations:

<u>1971</u>	<u>1972</u>
1,347	1,403

'Booster' Immunisations:

<u>1972</u>
1,337

WHOOPING COUGH

In the Division 1,326 children were immunised during 1971, compared with 1,177 during 1970.

MEASLES

During 1971, taking the Division as a whole, 1,372 children were vaccinated.

VACCINATION OF PERSONS UNDER AGE 16 COMPLETED DURING 1971

TABLE 1

Completed Primary Courses - Number of Persons Under Age 16

Year of birth					Others under age 16	Total
1972	1971	1970	1969	1965-68		
8	1,043	323	11	17	1	1,403

TABLE 2

Reinforcing Doses - Number of Persons Under Age 16

Year of birth					Others under age 16	Total
1972	1971	1970	1969	1965-68		
-	20	19	2	1,257	916	2,214

TUBERCULOSIS

During 1972, 1 case of Pulmonary Tuberculosis were notified. The national picture for this disease is satisfactory; the same applies to this district.

B.C.G. VACCINATION

This procedure, for immunisation against tuberculosis, continues as before, during a pupil's first year in the Secondary School. The rate of uptake is very high, and the procedure carries very little risk of complication. The table below gives the local figures.



School	No. Tested	No. Positive	No. Negative	No. Vaccinated
PENISTONE GRAMMAR SCHOOL	243	20	223	210 (13 absent)

## GENERAL PROVISION OF THE HEALTH SERVICES

### HOSPITALS

The general hospitals for the Penistone area are Barnsley and Sheffield, with some small use of the Huddersfield hospitals.

Cases of infectious disease are treated at Lodge Moor Hospital, Sheffield, while maternity cases are accommodated at the Chapeltown Maternity Home, St. Helen's Hospital, Barnsley and the Princess Royal Maternity Home, Huddersfield.

### LABORATORY FACILITIES

The Public Health Laboratories at Wakefield and Sheffield are available to provide all the necessary investigations we may require in the epidemiological field. The respective Medical Directors are most willing to help and advise, and I am grateful to them.

### MORTUARY

There is a Mortuary in Penistone and this serves the surrounding area.

### AMBULANCE SERVICE

Ambulance facilities continue to be provided by the West Riding County Council in accordance with the requirements of Section 27 of the National Health Service Act, 1946. The service has been satisfactory over the year.

### WELL-WOMAN CLINICS

This service, designed to reduce cancer and general illness among women continues as before. At the clinic the following procedures take place - cervical smear, breast examination, pelvic examination, blood pressure reading, hemoglobin estimation, urine testing for sugar and albumin. The estimate the precise value of these clinics is difficult. There is no doubt, however, that the ladies are in favour, since our waiting lists show a distinct tendency to increase and there will be need to provide extra, regular, clinic sessions. This is, of course, an extension of the simple Cervical Cytology Clinics.

### FAMILY PLANNING

Direct Service Clinic sessions are now held regularly on alternate Wednesday afternoons at the Health Centre, Mill Road, Ecclesfield, and the Health Centre, Johnson Street, Stocksbridge. The Stocksbridge and Ecclesfield clinics can be used, or the patients can attend the Family Planning Association Clinic in Barnsley.

### CLINICS

Below are the tables showing the various clinics held within the Penistone District and, in certain cases, figures indicating the number of attendances during 1972:-

CHILD WELFARE CLINICS

Name and Address of Centre  Name of Doctor and Nurse in attendance	Day and time of sessions	Total number of attendances during the year	
<u>PENISTONE</u>  Shrewsbury Road.  Dr. J. M. Clark Mrs. D. Gibson Mrs. Y. Elliott	Monday p.m.	Number who attended for first time during 1972	Children up to five years
		180	1,645
<u>CAWTHORNE</u>  Parish Hall.  Dr. A. S. Nutt Mrs. D. Gibson	Alternate Thursdays p.m.	45	283
<u>MOBILE CLINIC - MILLHOUSE GREEN</u>  D. M. R. McGinty Mrs. Y. Elliott	Alternate Thursdays a.m.	60	320
<u>MOBILE CLINIC THURGOLAND</u>  Dr. M. R. McGinty Mrs. D. Gibson	Alternate Thursdays a.m.	79	399

Other clinics held at SHREWSBURY ROAD include - Ophthalmological, Chiropody  
and Speech Therapy.

HEALTH VISITING STAFF AS AT 31st DECEMBER, 1972

<u>Name</u>	<u>Address</u>	<u>Telephone number</u>
Mrs. Y. Elliott	Mount Tabor House, Scholes Road, Holmfirth, Huddersfield. HD7 7HF	Holmfirth 4442
Mrs. D. Gibson	Dearne Head Cottage, Addingley Lane, Upper Cumberworth, Huddersfield.	High Flatts 468

During the year total of 5,883 visits were made by the Home Nurses to 228 new cases.

# HOUSING STATISTICS.

No. of Dwelling Houses in District 2878

No. of Houses included in above (a) Back-to-Back - (b) Single back

## SLUM CLEARANCE

Estimated number of unfit houses at 31.12.72 in respect of which no representation has yet been made -

Please give details of future slum clearance programmes

Progressive inspection and representation

## HOUSES IN CLEARANCE AREAS AND UNFIT HOUSES ELSEWHERE

No. of houses included in Representation made during the year

(a) in Clearance Areas -

(b) individual unfit houses 6

## GRANTS FOR CONVERSION OR IMPROVEMENT OF HOUSING ACCOMMODATION

	Formal applications received during the year	Applications approved during the year	Number of dwellings completed during year
	Number of dwellings	Number of dwellings	
(a) CONVERSIONS (The number of dwellings is the number resulting from completion of the work)	4	4	8
	5	5	5
(b) IMPROVEMENTS	59	59	46

## DETAILS OF ADVANCES FOR THE PURPOSE OF ACQUIRING OR CONSTRUCTING HOUSES

Three advances totalling £4765.00

## NUISANCES

Notices for abatement	Outstanding at 31.12.71	Issued in 1972	Abated in 1972	Oustanding at 31.12.71
Informal	1	33	33	1
Statutory		-	-	-



MEAT INSPECTION

No. of Slaughter Houses in District

1

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
No. killed	181	135	33	251	30	-
No. inspected	181	135	33	251	30	-
All diseases except Tuberculosis and Cyc- ticeri Whole carcasses condemned		3	4	4		
Carcasses of which some part or organ was condemned	29	41	7	20	2	
Percentage of the number inspected affected with disease other than tuber- culosis and cysticeri	16%	32.6%	33%	12%	6.7%	

DRAINAGE AND SEWERAGE

No. of houses connected to sewers	2815
do. with satisfactory PRIVATE drainage	-
do. with unsatisfactory drainage	63

SANITARY ACCOMMODATION

No. of houses provided with water closets	2815
do. provided with waste water or trough closets	
do. provided with chemical closets	24
do. provided with earth or pail closets	39
No. of earth closets etc. converted to water closets	-
No. of houses served with earth closets etc. due to lack of sewer or water facilities	Not known

Any special action taken to secure conversion of earth closets, etc.

Improvement Grants and Privy Conversion Grants.

WATER

Public Supplies:-

Water undertaker	Nature/origin of supply	Natural fluoride Content	Number of dwellings supplied
Barnsley Corporation	Reservoir/Deep Wells		
Sheffield Corporation	Reservoir		
Private	Deep Wells		

No. of dwelling houses on public supplies	2724
No. of houses not supplied from public main, but having a satisfactory PRIVATE AND PIPED supply	149

Give details of:-

- (i) Any insufficiency of supply and No. of houses involved Not known
- (ii) Any unsatisfactory supply and No. of houses involved Not known



